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COMMISSIONER FOR PATENTS
 UNITED STATES PATENT AND TRADEMARK OFFICE
 WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 9115

SERIAL NUMBER 09/901,852	FILING DATE 07/09/2001 RULE	CLASS 600	GROUP ART UNIT 3736	ATTORNEY DOCKET NO. 50230/002001
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APPLICANTS

Michael O'Donnell, West Bloomfield, MI;

** CONTINUING DATA ***** *26 Nov*** FOREIGN APPLICATIONS ***** *26 Nov*IF REQUIRED, FOREIGN FILING LICENSE GRANTED. ** SMALL ENTITY **
** 08/23/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>John Reed</i> <i>JO</i>
Verified and Acknowledged	Examiner's Signature <i>John Reed</i> Initials <i>JO</i>
ADDRESS	STATE OR COUNTRY MI
	SHEETS DRAWING
	TOTAL CLAIMS 6
	INDEPENDENT CLAIMS 2

ADDRESS

21559

TITLE

Behavior change tool

FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Bib Data Sheet

CONFIRMATION NO. 9115

SERIAL NUMBER 09/901,852	FILING DATE 07/09/2001 RULE	CLASS 434	GROUP ART UNIT 3714	ATTORNEY DOCKET NO. 50230/002001
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APPLICANTS

Michael O'Donnell, West Bloomfield, MI;

**** CONTINUING DATA** ******JL Nue***** FOREIGN APPLICATIONS** ******JL Nue***IF REQUIRED, FOREIGN FILING LICENSE GRANTED** ** SMALL ENTITY **

** 08/23/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verifier and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	STATE OR COUNTRY MI	SHEETS DRAWING 0	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 2
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ADDRESS

21559

TITLE

Behavior change tool

FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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